

TENNESSEE GENERAL ASSEMBLY
FISCAL REVIEW COMMITTEE



FISCAL NOTE

HB 2317 - SB 2372

March 14, 2016

SUMMARY OF BILL: Creates the *Kenneth and Madge Tullis, MD, Suicide Prevention Training Act of 2016*. Requires the Department of Mental Health and Substance Abuse Services (DMHSAS), in collaboration with the Tennessee Suicide Prevention Network (TSPN), to develop a model list of training programs in suicide assessment, treatment, and management. Authorizes the Board for Professional Counselors, the Board of Social Work Licensure, the Board of Alcohol and Drug Abuse Counselors, the Board of Examiners in Psychology, and the Board of Occupational Therapy, to create training programs that involve suicide assessment, treatment, management, or a combination of any such elements. The DMHSAS is required to consult with boards, public and private institutions of higher education, experts in suicide assessment, treatment, and management, and affected professional associations. The DMHSAS is required to report the model list of training programs to the Department of Health (DOH) no later than December 15, 2016. Requires certain licensees, once every two years, to complete a training program in suicide assessment, treatment, and management as approved by each respective health board. Such licensees must complete a training program no later than July 31, 2017. Establishes that any licensee seeking initial licensure or certification on or after July 1, 2017, may take a six-hour academic training program in suicide prevention, assessment, treatment, and management in lieu of taking a board-approved training program. The hours spent completing this training program shall count toward meeting any applicable continuing education requirements for such applicable profession. This Act shall take effect upon becoming law.

ESTIMATED FISCAL IMPACT:

Increase State Revenue –

\$59,400/FY16-17/Division of Health Related Boards

\$55,100/FY17-18 and Subsequent Years/Division of Health Related Boards

Increase State Expenditures –

\$59,400/FY16-17/Division of Health Related Boards

\$55,100/FY17-18 and Subsequent Years/Division of Health Related Boards

Assumptions:


- According to the DMHSAS, this act closely resembles a 2013 public chapter from Kentucky.

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- According to the DMHSAS, there will be no cost in developing these programs, as they expect to be able to utilize Kentucky's established regimen.
- According to the DMHSAS, it can accomplish the requirements of this act within its existing resources.
- The applicable licensees include social workers, marriage and family therapists, professional counselors, or pastoral counselors, alcohol and drug abuse counselors, psychologists, occupational therapists, and any other professionals working in the field of mental health and substance abuse services.
- According to the DOH, this legislation will impact approximately 12,824 licensees of various boards under the Division of Health Related Boards.
- Each licensee would be required to complete a training program in suicide assessment, treatment, and management every two years.
- Based on information provided by the DOH, it will need one additional administrative services assistant 2 position to assess compliance with this new requirement.
- A recurring increase in state expenditures of \$55,102 (salary \$37,950 + benefits \$15,152 + communications \$1,400 + supplies \$600).
- A one-time increase in state expenditures of \$4,300 (office furniture \$2,700 + computer \$1,600).
- For purposes of this fiscal note, an effective date of July 1, 2016 is assumed.
- An increase in state expenditures in FY16-17 of \$59,402 (\$55,102 + \$4,300).
- An increase in state expenditures in FY17-18 and subsequent years of \$55,102.
- Pursuant to Tenn. Code Ann. § 4-29-121, all health related boards are required to be self-supporting over any two-year period.
- These licensees will pay a fee to cover the cost of administering the program. Any revenue gained in excess of expenditures will be not significant.

CERTIFICATION:

The information contained herein is true and correct to the best of my knowledge.



Krista M. Lee, Executive Director

/jdb